

מדינת ישראל

משרד ראש הממשלה

ארכיון המדינה
 משרד הביטחון - המנהל
 נפתח שולחן עבודה

4899/20
 מס' תיק

Ibrahim Abu Zahra - ~~Abu Zahra~~ ff

T.C.96

11/4/1938 - 22/9/1934

מחלקה

מדינת ישראל
 גנרל המדינה



מ - 4899/20

מזהה פיזי

כתובת:

03/12/2003

02-108-11-11-07

מ

ארץ ישראל
 ממשלת המנדט

מס' תיק מס' T.C.96
 מס' כיסא

GOVERNMENT OF PALESTINE.

Registry No.

T.C. 96

Other files dealing with
same Subject.

SUBJECT.

Ibrahim Abu Zahra

23063-100000-12 1 33-A.P.

Referred to

Date

Referred to

Date

Referred to

Date

S.O.

16-10-74

P.A.

Date

P. 3.

(16)

Sum Q. A. C. Sum to A. D.

(18)

Copy from A. D. C. Sum to A. D. C.

(20)

F ADC NS to ADC

do. i.

Arrange to

J. P.

6.3.38

A. D. C.

done re.

AC

7/3/38

(22) F ADC NS to ADC

(23) F ADC NS to ADC

(24)

Sum A. D. C. Sum to A. D. C.

drawn off to see

sum

12.4.38

J. P.

12.4.38



GOVERNMENT OF PALESTINE

24

No. 710723-141

CONFIDENTIAL

y.e.-96
62
12 APR 1938

District Offices,
Nablus.

11th April, 1938

Reference to previous correspondence:

No.

2

The Assistant District Commissioner, Samaria, presents his compliments to

Assistant District Commissioner, Tulkarm,

and has the honour to enclose the undermentioned document for information

and retention.

Subject: Clerical Staff - confirmation of Ibrahim
Abu Zahra.

GPP. 1378-2000-3-8-36

Date	Description
2-4-38	Copy of letter No.U/2000/34 from Chief Secretary, Jerusalem.

(Copy)

A

U/2000/34.

2nd April, 1938

CONFIDENTIAL

A/District Commissioner,
Haifa and Samaria District.

I am directed to refer to the correspondence ending with your letter No.1257/1-598 of the 24th March, 1938, recommending the confirmation of Ibrahim Eff. Abu Zahra, Clerk Grade O, and to inform you that in view of the fact that the limited number of vacancies in the pensionable cadre has now already been filled, it is not possible to confirm him at present.

(sgd) J.GUTCH

for CHIEF SECRETARY

T/110/20-13

CONFIDENTIAL

19th March, 1938.

District Commissioner,
Haifa and Samaria District,
Haifa.

Subject:- Clerical Staff.

Reference:- My letter No. T/110/20 of 3.2.1938.

I enclose herewith a copy of the
Record of Examination in respect of Ibrahim
Eff. Abu Zahra who has been medically examined
and found fit for permanent and pensionable
service.

(Sgd) J. H. H. Pollock

ASSISTANT DISTRICT COMMISSIONER
SAMARIA.

Copy to :- Assistant District Commissioner
Tulkarm

13

10/20

10/20

10/20/2010
10/20/2010

84
GOVERNMENT OF PALESTINE

No. T/110723-12

22
DISTRICT OFFICES,
NABLUS

Reference to previous correspondence

17th March, 1938.

No.

CONFIDENTIAL
18 MAR. 1938
45
Asst. Dist. Commissioner, Samaria
The ~~XXXXX District Commissioner~~ presents his compliments to Assistant
District Commissioner, Tulkarm

and has the honour to enclose the undermentioned document for information

and retention

Subject: Ibrahim Eff. Abu Zahra

GPP. 1377-2000-3.8.36

Date	Description
-----	Copy of record of examination of the above named.

RECORD OF EXAMINATION

O.M. 56

(A)

.....**Central.**.....Medical Board.
 Register No.....**3450.**.....Date.....**9-3-38.**.....Place.....**Jerusalem.**.....
 Name.....**Ibrahim Abu Zehra.**.....Date of Birth.....**1913.**.....Sex.....**Male.**.....
 Appointment.....**Clerk.**.....Department.....**Administration.**.....
 Terms of application for Medical Examination.....**Fitness for per. & pens. service.**.....

GPP, 2437-10,000-11-1-37 246/8.

Height.....Weight.....
 Without glasses. With glasses. Strength of glasses.

Vision { Right.....**6/6**.....
 Left.....**6/6**.....
 Combined.....

Eye disease.....**Clear.**.....

Hearing { Right.....**Normal.**.....
 Left.....**"**.....

Teeth.....**Good.**.....

Speech.....**Normal.**.....

Throat and Nose.....**Clear.**.....

Intelligence.....**Normal.**.....

State of vaccination.....**Scar right arm.**.....

General development and nutrition.....**Normal.**.....

Chest, shape.....**"**.....

Heart and arteries.....**"**.....

Lungs.....**"**.....

Spleen.....**"**.....

Lymphatic glands.....**"**.....

Hernia.....**Nil.**.....

Varicocele.....**"**.....

Venereal Disease.....**"**.....

Hæmorrhoids.....**"**.....

Varicose Veins.....**"**.....

Skin.....**Normal.**.....

Joints and osseous system.....**"**.....

Urine.....**"**.....

Special observations.....

.....

Finding of Board.....**Fit for permanent and pensionable service.**.....

.....

Signature of
 Members of Board

{ *[Signature]*
[Signature]
[Signature]

RECORD OF EXAMINATION

1911

NAME OF CANDIDATE

NAME OF CANDIDATE

NAME OF CANDIDATE

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NAME OF CANDIDATE

MEDICAL REPORT

O. M. 70

To M.O.

following persons are sent you for (A)

Place

Date



Signature

Department

No.	Name	Grade and Department	Age & Sex	Disease	Disposal of case
	Thohi eff. Dm. Tulka	D 7	156 25	Cold	to 40th rest.

Place

Date

Signature of M.O.

INSTRUCTIONS FOR SENDING MEDICAL REPORTS.

1. This form must be signed by a Senior Official under whom the persons sent for medical examination are serving.
2. The Official signing must fill in request for examination at the top of the form and the Column "No" "Name" "Grade & Department" and "Age & Sex" (A) State whether for "treatment" "examination as to fitness for duty," "Medical Boarding for sick leave" etc.
3. The form is to be sent to the Medical Officer in duplicate. He will fill in particulars of "disease" and "disposal of case" and retain one copy, returning the other to the official who signed.
The Medical Officer will state "Duty" "Excused Duty" "hours" "Admitted to Hospital" "Finding of Medical Board" etc.

(COPY)



59/2806

28th February, 1938.

From:

President,
Central Medical Board
C/O Director of Medical Services.
Department of Health
Jerusalem.

To:-

Assistant District Commissioner,
Samaria Division,
Nablus.

77

ASSISTANT DISTRICT COMMISSIONER'S
OFFICES, SAMARIA, NABLUS

No. T/110/20 4/1938

Transmitted to: *Do Hattus Tulharni*

(information retention
investigation and review)

action

Notice to appear before the Central Medical
Board.

Name: Ibrahim Eff. Abu Zahara.

Appointment: Clerk.

Reference:- Your T/110/20 -64 of 14.2.38.

The above mentioned should appear for
examination before the Central Medical Board,
at the Government Hospital, Jerusalem, on
Wednesday the 9th of March, 1938, at 10.00 a.m.

Will you please instruct him/her to report.

Sgd. ???

PRESIDENT

CENTRAL MEDICAL BOARD.

18.57

24

~~Massachusetts~~

13/1

15.2.38

Asst. District Commissioner,
Nablus.

Subject:-General Clerical Service -
Promotions.

Reference:-Your S/110/17-36 of 14.2.38.

The only unconfirmed member of my staff serving in Grades O & P is Ibrahim Abu Zahra, Grade O. You have already recommended his confirmation, vide your letter No. T/110/20-4 of 3.2.38 addressed to District Commissioner Haifa and Samaria District.

(Sgd.) G. G. Grimwood.

GG/BM.

ASST. DISTRICT COMMISSIONER
I/C TULKARM SUB DISTRICT.

41
T/110/20 - 4

CONFIDENTIAL

3rd February, 1938

District Commissioner,
Haifa and Samaria District,
Haifa

Subject:- Clerical Staff.

Reference: My letter No. T/110/13 of
24-8-34.

Ibrahim Abu Zahra, Clerk grade "O",
now stationed at Tulkarm was transferred from the
Police Force on 1-10-34, and he has now applied
to be confirmed in a permanent and pensionable post.

2. Ibrahim Abu Zahra's work justifies a
recommendation being made that he should be confirmed
in a pensionable post and I recommend that this should
be done.

(Sgd) J. H. H. Pollock

ASSISTANT DISTRICT COMMISSIONER
SAMARIA

Copy to:- Assistant District Commissioner, Tulkarm. ✓

T.C.96 - 19

31.1.38

Asst. District Commissioner,
Nablus.

Subject:- Ibrahim Abu Zahra Grade 'O'

The above member of my clerical staff was transferred to the Clerical service from the Police strength on 1st October 1934. He has, it seems, not yet been confirmed in his appointment.

2. In my file there is neither an establishment warrant nor a medical report, but I believe, from my letter No. TC.96 of 22.11.34, that these may be available in your office.

3. I consider that Ibrahim Abu Zahra should be confirmed in his appointment, as his work and conduct are satisfactory; and I would be grateful if the necessary steps might be taken, provided that ~~xxx~~ he has been passed fit for permanent and pensionable service. If this is not the case, I would be glad if I might be informed and I will instruct him to report to the District Medical Board.

GG/BM.

(Sgd.) G. G. Greenwood

ASST. DISTRICT COMMISSIONER
I/C TULKARM SUB DISTRICT.

CONFIDENTIAL

WFO 100-100000

100-100000

100-100000

CONFIDENTIAL

CONFIDENTIAL

The above information is being furnished to you

for your information and is not to be distributed

outside of your agency without the express written

approval of the Director, FBI.

Very truly yours,

Special Agent in Charge

100-100000

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100-100000

CONFIDENTIAL

WFO 100-100000

CONFIDENTIAL

WFO 100-100000



16

Tulbarrin
31.1.38

District Officer,
Tulbarrin.

Sir,

I was transferred from the Police Force to my present job in the Clerical Service Grade "O" on the 1st. October, 1934. Until now I have not been confirmed in my job.

I therefore beg you to communicate with the concerned authorities for this confirmation please.

I have the honour to be

Sir,
Your obedient servant

J. Abu Johra

A.D.C.

The Shaftey's say up
asking for names of clerical
staff who have not been confirmed
in their present posts.

Replies that all with
the exception of Mr J. John
Zahra who was appointed
on 1.10.1934, pl

W

20.1.38

B

1.10.34.

MEDICAL REPORT

O. M. 70

To M.O. Tulkarm

The following persons are sent you for (A) treatment

Place Tulkarm

Date 26.6.37

W. Hall Signature
District Officer Department

GPP, 1801-500 Bks. - 10-9-36 195/8.

No.	Name	Grade and Department	Age & Sex	Disease	Disposal of case
	Ibrahim SEKENE Abu Zehra	O.D.A.	25 Male	Nasal poly.	examined & specialist 3 days Excused duty

Place Tulkarm

Date 26.6.37

W. Hall Signature of M.O.

INSTRUCTIONS FOR SENDING MEDICAL REPORTS.

1. This form must be signed by a Senior Official under whom the persons sent for medical examination are serving.
2. The Official signing must fill in request for examination at the top of the form and the Column "No" "Name" "Grade & Department" and "Age & Sex" (A) State whether for "treatment" "examination as to fitness for duty" "Medical Boarding for sick leave" etc.
3. The form is to be sent in the Medical Officer in duplicate. He will fill in particulars of "disease" and "disposal of case" and retain one copy, returning the other to the official who signed.
The Medical Officer will state "Duty" "Excused Duty" "hours" "Admitted to Hospital" "Finding of Medical Board" etc.

✓ 9 30
E 5 1 50

F. A. No 64 of 30.63

MEDICAL REPORT

O. M. 70

To M.O. Tulbarm

The following persons are sent you for (A) examination

Place Tulbarm

Date 23.6.1937

(Circular stamp: DISTRICT OFFICERS TULBARM)
(Signature: W. A. H. H. H.)
 Signature
 District Administrator
 OPP 4801—500 Hks.—10-9-36 185/5.

No.	Name	Grade and Department	Age & Sex	Disease	Disposal of case
	Ibrahim Al Zahra	"O" Dist. Adm.	25 Male	Cold	5-3 day excused duty.

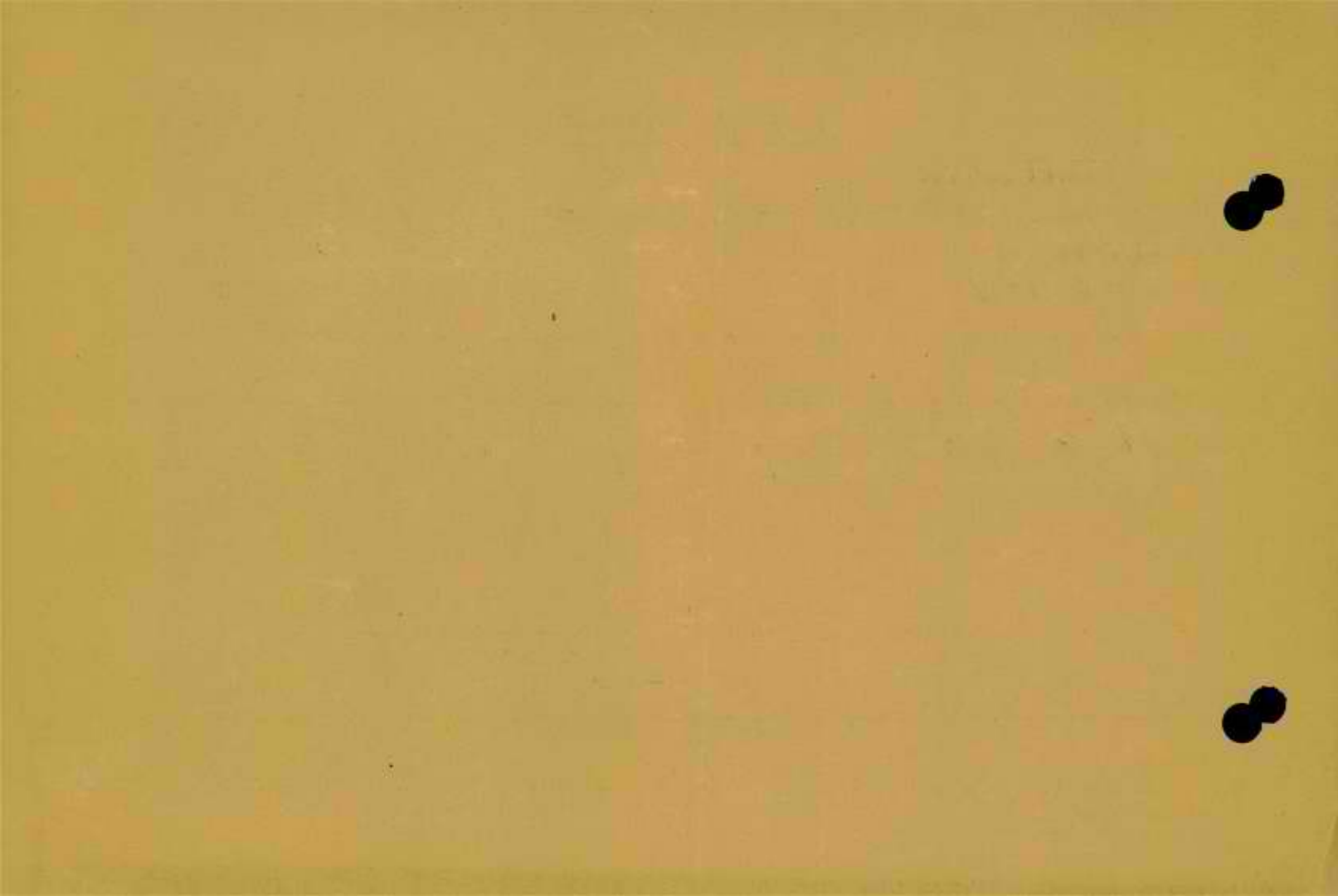
Place Tulbarm

Date 23/6/37

(Signature: J. P. H. H. H.)
 Signature of M.O.

INSTRUCTIONS FOR SENDING MEDICAL REPORTS.

1. This form must be signed by a Senior Official under whom the persons sent for medical examination are serving.
2. The Official signing must fill in request for examination at the top of the form and the Column "No" "Name" "Grade & Department" and "Age & Sex" (A) State whether for "treatment" "examination as to fitness for duty," "Medical Boarding for sick leave" etc.
3. The form is to be sent to the Medical Officer in duplicate. He will fill in particulars of "disease" and "disposal of case" and retain one copy, returning the other to the official who signed.
 The Medical Officer will state "Duty" "Excused Duty" "hours" "Admitted to Hospital" "Finding of Medical Board" etc.



MEDICAL REPORT

O. M. 79

To M.O. Tulkarm

The following persons are sent you for (A) _____

Place Tulkarm

Date 15-6-37


W. A. C. C. C. C. Signature
Sub District Officer Department

GPP. 14/11-500 Hks. - 10-9-36 185/8.

No.	Name	Grade and Department	Age & Sex	Disease	Disposal of case
	<u>Sheehun Loff</u> <u>Ahu Zahra</u>	<u>"O" Dist</u> <u>Administ</u>	<u>24</u>	<u>Coups</u>	<u>3 days excused</u> <u>duty</u>

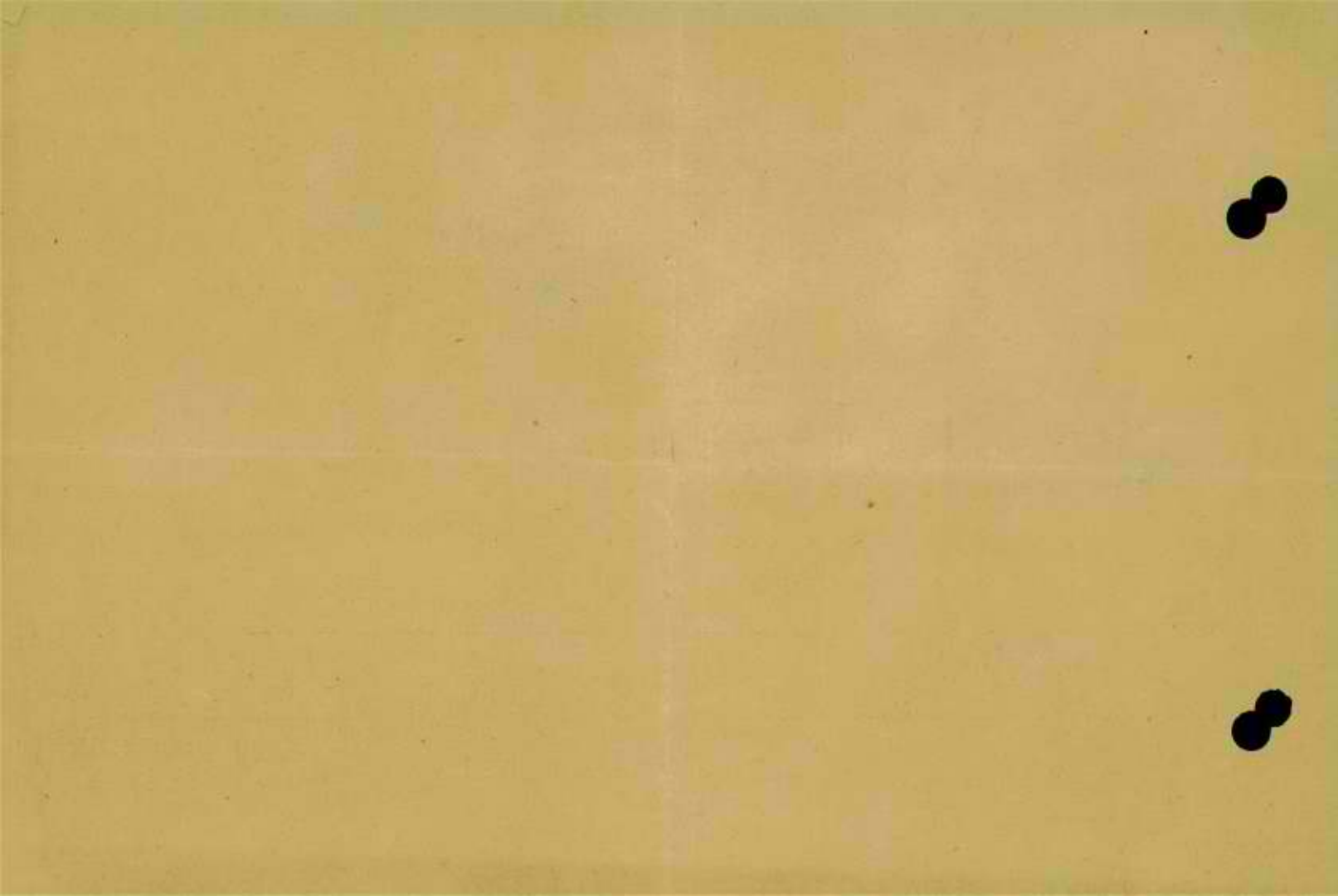
Place Tulkarm

Date 15/6/1937


W. A. C. C. C. Signature of M.O.

INSTRUCTIONS FOR SENDING MEDICAL REPORTS.

1. This form must be signed by a Senior Official under whom the persons sent for medical examination are serving.
2. The Official signing must fill in request for examination at the top of the form and the Column "No" "Name" "Grade & Department" and "Age & Sex" (A) State whether for "treatment" "examination as to fitness for duty," "Medical Boarding for sick leave" etc.
3. The form is to be sent to the Medical Officer in duplicate. He will fill in particulars of "disease" and "disposal of case" and retain one copy, returning the other to the official who signed.
The Medical Officer will state "Duty" "Excused Duty" "hours" "Admitted to Hospital" "Finding of Medical Board" etc.



I have read the contents of Chief Secretary's
Circular No.27 dated 11.3.37 and I understand the terms
thereof".

Date 10.4.1937

J. Abu Jahra
Signature

I have read the contents of this letter.

Respectfully,
J. Edgar Hoover

Director

Mr. Tolson

Washington

MEDICAL REPORT

O. M. 70

To M.O.

The following persons are sent you for (A)

Place

Date

Tulham

treatment

Tulham

27.3.37

Signature

Department

Dist. Office

G.P. 2801-500 Hks. - 10-9-36 185/8.

No.	Name	Grade and Department	Age & Sex	Disease	Disposal of case
	Throkin off.	Chuk	25	acute	3 days absent
	Old Zohra	C. O.		insults	duty.

Place

Date

Tull Co
27/3/37

J. P. M. B. A. D.

Signature of M.O.

INSTRUCTIONS FOR SENDING MEDICAL REPORTS.

- This form must be signed by a Senior Official under whom the persons sent for medical examination are serving.
- The Official signing must fill in request for examination at the top of the form and the Columns "No" "Name" "Grade & Department" and "Age & Sex" (A) State whether for "treatment" "examination as to fitness for duty." "Medical Boarding for sick leave" etc.
- The form is to be sent to the Medical Officer in duplicate. He will fill in particulars of "disease" and "disposal of case" and retain one copy, returning the other to the official who signed.
The Medical Officer will state "Duty" "Excused Duty" "hours" "Admitted to Hospital" "Finding of Medical Board" etc.

I declare that I have persuaded the Official
Secrets Ordinance No.18 of 1932 and I hereby certify
that its application to myself is understood.

Date

16.3.937

J. H. Zakra
Signature.



MEDICAL REPORT

To M. O. TulkarniThe following persons are sent you for (A) ExaminationPlace TulkarniDate 12.1.37Signature [Signature]Dept. Adm. Department

23216-500 Pads-9.2.33-A.P.

No.	Name	Grade and Department	Age & Sex	Disease	Disposal of Case
	<u>Shahin Eff</u> <u>Al-Jahra</u>	<u>"O"</u> <u>Dist. Adm.</u>	<u>24</u> <u>Male</u>	<u>Influenza</u>	<u>In 3 days</u> <u>Excused duty</u>

Place TulkarniDate 12/1/37Signature of M. O. [Signature]

INSTRUCTIONS FOR SENDING MEDICAL REPORTS.

1. This form must be signed by a Senior Official under whom the persons sent for medical examination are serving
2. The Official signing must fill in the request for examination at the top of the form and the column "No." "Name" "Grade & Department" and "Age & Sex" (A) State whether for "treatment" "examination as to fitness for duty," "Medical Boarding for sick leave" etc.
3. The form is to be sent to the Medical Officer in duplicate. He will fill in particulars of "disease" and "disposal of case" and retain one copy, returning the other to the official who signed.
The Medical Officer Will state "duty" "excused duty" "Sours" "admitted to Hospital" finding of Medical Board etc.

MEDICAL REPORTTo M. O. *Robert P. Walker*The following persons are sent you for (A) *Treatment*Place *Walker*Date *4-4-36*

Signature

Department

26435-300 Pads-247/35, Com. P.

No.	Name	Grade and Department	Age & Sex	Disease	Disposal of case
	<i>Isabiah W. Walker</i>	<i>O' 5A</i>	<i>23</i>	<i>Dyspepsia</i>	<i>Examine duty to get a pass</i>

Place *Walker*Date *4/4/36*Signature of M.O. *J. P. Winters***INSTRUCTIONS FOR SENDING MEDICAL REPORTS.**

1. This form must be signed by a Senior Official under whom the persons sent for medical examination are serving.
2. The Official signing must fill in the request for examination at the top of the form and the Column "No." "Name" "Grade & Department" and "Age & sex" (A) State whether for "treatment" "examination as to fitness for duty," "Medical Boarding for sick leave" etc.
3. The form is to be sent to the Medical Officer in duplicate. He will fill in particulars of "disease" and "disposal of case" and retain one copy, returning the other to the official who signed.
The Medical Officer will state "duty" "excused duty" "hours" "admitted to Hospital" finding of Medical Board etc.



MEDICAL REPORT

Q. M. 70

To M. O. TupperThe following persons are sent you for (A) TreatmentPlace Tupper

Signature.

Date 28 Nov 75

Department.

26324-300 pds.-4.4.34-G.C.P.

No.	Name	Grade and Department	Age & Sex	Disease	Disposal of case
	<u>Shelton</u>	<u>B.</u>	<u>23</u>	<u>Cold</u>	<u>to 40th</u>
	<u>Walter Jones</u>	<u>B.H.</u>	<u>23</u>	<u>Pruritis</u>	<u>Excused</u>
					<u>duty</u>

Place TupperSignature of M. O. J. H. Kautz

INSTRUCTIONS FOR SENDING MEDICAL REPORTS.

1. This form must be signed by a Senior Official under whom the persons sent for medical examination are serving.
2. The Official signing must fill in the request for examination at the top of the form and the Column "No." "Name," "Grade & Department" and "Age & Sex" (A) State whether for "treatment," "examination as to fitness for duty," "Medical Boarding for sick leave" etc.
3. The form is to be sent to the Medical Officer in duplicate. He will fill in particulars of "disease" and "disposal of case" and retain one copy, returning the other to the official who signed.

The Medical Officer will state "duty" "excused duty" _____ hours "admitted to Hospital" finding of Medical Board etc.

GOVERNMENT OF PALESTINE.

40

In reply please quote No. T.C. 96

P.O.B. 1
Tel. No. 11

8

DISTRICT OFFICES
TULKARM.

13.9.35.

Asst. District Commissioner,
Nablus.

Subject:-Annual Increment.

I beg to point out that the annual increment of Ibrahim Eff. Abu Zahra falls due on 1.10.35.

2. I recommend the grant of this increment as his work and conduct are satisfactory.

3. I certify that he has fulfilled all requirements in respect of which the grant of annual increment is conditional.

HK/BM.

[Signature]
DISTRICT OFFICER.

80
T.C.96

7
22.11.34.

Asst. District Commissioner,
Nablus.

Subject:-History Sheet - Ibrahim Eff. Abu
Zahra.

Reference:-Your T/110/13 of 12.11.34.

I beg to return duly completed the attached
Personnel Form No.21 in respect of above named
officer.

2. I enclose also a certified true copy of
Medical record sheet.

HK/BM.

MM
A/DISTRICT OFFICER.

Telegraphic Address: "POLSEC JERUSALEM"
Telephone Number: 1077 JERUSALEM.

HEADQUARTERS,

THE PALESTINE POLICE AND PRISONS,

P.O.B. 436,

JERUSALEM.

In your reply please quote

No. P. 87/1334.

22 NOV 1934

20th November, 1934.

A/District Office,
Tulkarm.

Subject: Medical Examination Record-
No. 1334 ex Constable Ibrahim
Abu Zahra.

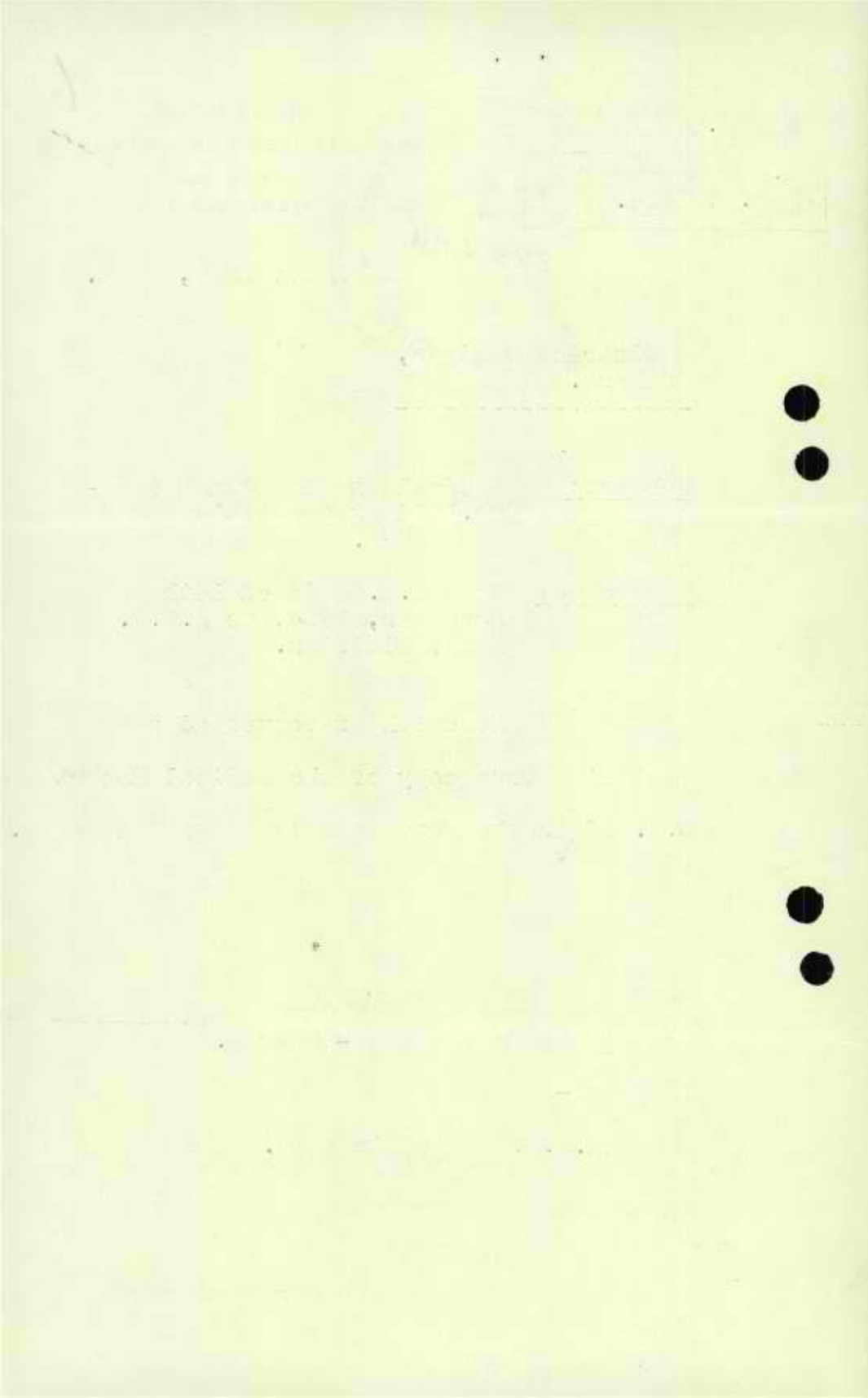
Reference: Your T.C. 96 dated 14th
November, 1934, to A.S.P.
Ramle Division.

Herewith as requested a
certified true copy of the Medical Report
O.M. 56 on the above mentioned ex Constable.

f. Bowden
INSPECTOR-GENERAL.

Copy to:-

A.S.P. Ramle Division.



75
T.O. 96

14.11.34.

A.S.P., Ramleh

Subject:- Medical examination record -
Ibrahim Abu Zahra Ex Constable No
1334

I shall be much obliged if you will either
supply this office with the original medical
examination sheet of above named officer or with a
certified true copy of same.

HK/BM.

A/DISTRICT OFFICER.

C
O
P
Y

1287/i.

U/2000/34.



CHIEF SECRETARY'S OFFICE.
JERUSALEM.

27th October, 1934.

District Commissioner.
Northern District.

It is requested that the attached copy of Personnel Form No.21 may be completed by Ibrahim Eff. Abu Zahra and returned to the Chief Secretary's office as soon as possible.

4760

PRESIDENTIAL OFFICES	
No.	T/110/13
Transmitted to	12/11/34
For	DO. Tullu

S/110/4 - 10 45



13th. October, 1934.

District Commissioner,
Northern District,
Haifa

Subject:- Ibrahim Abu Zahra.

Further to my letter T/110/13 of
24th. August, 1934, this officer assumed the
duties of Revenue Clerk in the District Offices,
Tulkarm as from the 1st. instant.

(Sgd.) H. M. FOOT

ASSISTANT DISTRICT COMMISSIONER
SAMARIA

Copy to:- District Officer, Tulkarm.

64
In reply please quote
No. **T.C.96**

P.O.B. 1
Tel. No. 11

DISTRICT OFFICES
TULKARM.

1.10.34. 2

Asst. District Commissioner,
Nablus.

Subject:-Revenue Clerk - Ibrahim Abu
Zahra.

Reference:-Your S/110/4 of 24.9.34.

I beg to inform you that the above
named officer has reported for duty on 1st inst. and
resumed work at the revenue office as from the
aforesaid date.

HK/BM.

AM
DISTRICT OFFICER.

(Copy)

P.87/1334



22nd. September, 1934.

District Superintendent of Police,
Southern District.

Subject:- No.1334 Constable Ibrahim
Aub Zahra.

I am to inform you that approval has been
given for the transfer of this constable to the
Clerical Service.

2. He should be instructed to report to
the District Offices, Nablus, on 1st. October,
1934, from which date he will be struck off the
strength of the Force.

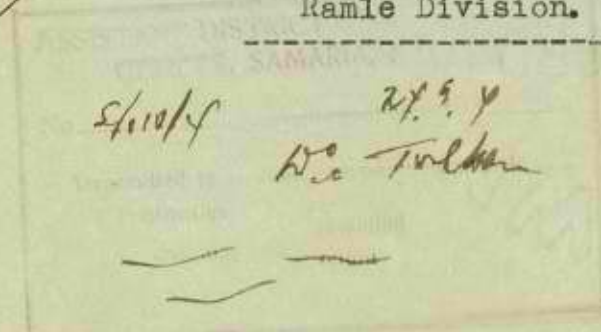
(sgd) M.S. O'ROKE

for INSPECTOR-GENERAL

Copy to:

District Commissioner,
Northern District.
Ref. Chief Secretary's
letter No.W/2000/34 of
19-9-1934.
Assistant District Commissioner,
Samaria
Assistant Supt. of Police,
Ramle Division.

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Date of Attendance	Place.	Disability & reference to Laboratory report.	Treatment or disposal.	Remarks :- finding of Medical Board or reference to correspondence etc.	Date returned to duty
28-10-25	Guthrie	Cold	2 day excuse duty		30-10-25
4-4-26	"		One day excuse duty		

Date of Attendance	Place.	Disability & reference to Laboratory report.	Treatment or disposal.	Remarks:- finding of Medical Board or reference to correspondence etc.	Date returned to duty